

SPINAL COURIER

The spinal cord disability information source for Arkansans since 1989

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AgrAbility Project Comes To Arkansas

As farmers and agricultural workers age (most are over the age of 55), so does the prevalence of health conditions that impact their ability to be productive. The health conditions that hinder a farmer or agricultural worker's production can be work related or non-work related, permanent or temporary, or related to an accident or chronic disease. In an effort to minimize the obstacles that these health conditions can cause, AgrAbility was formed in 1991 through USDA grant funds.

AgrAbility was started in Arkansas in August 2010 through the University of Arkansas Division

of Agriculture Cooperative Extension Service. Dr. LaVona Traywick, with help from Arkansas AgrAbility's partners, wrote the grant proposal that secured the state funding through March 31, 2014. Arkansas AgrAbility is coordinated by Extension's Jessica Vincent and partnered with University of Arkansas Department of Biological and Agricultural Engineering, ICAN – Increasing Capabilities Access Network, and the Arthritis Foundation Southeast Region, Inc. Arkansas-Louisiana.

What services does Arkansas AgrAbility provide? The vision of AgrAbility is "to enable a high quality lifestyle for farmers, ranchers, and other agricultural workers with disabilities." To do this, AgrAbility provides on-site assessments of agricultural work sites and/or homes to identify the barriers that are hindering productivity and/or independence.

The on-site assessments are provided at no charge. Once the assessment is complete, recommendations for appropriate assistive technology (equipment or tool modification), modified working and/or living practices, or other possible solutions to overcome the identified barriers are provided.

See **AgrAbility Project Comes to Arkansas** on page 3

2011 Spina Bifida Camp



'Super Joe' Noah Norwood With Camp Aldersgate Executive Director Sarah Wacaster

Another year of camp has ended and 40 campers, ages 6 to 16, had a fun-filled week.

At week's end, family members, friends and staff filled the Commons Building for the awards ceremony.

Excitement grew as the campers piled into the auditorium. Each camper received an award.

Noah Norwood of Helena-West Helena was awarded this year's Super Joe Outstanding Camper.

Spina Bifida Camp is a collaborative program supported by the Arkansas Spinal Cord Commission, Camp Aldersgate and MedCamps of Arkansas.

If you missed Camp this year, and want to participate next year, be sure to look for details in our January 2012 newsletter, talk with your Case Manager, or contact Mary Jo Stanton at 501-296-1788 or 800-459-1517 or by e-mail at mary. stanton@arkansas.gov.

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SPINAL COURIER

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With Thanks

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Janice VanHook
In Memory of Maria Sullivan
Sherry Woolridge

ASCC accepts tax-deductible donations. Contributions are used to assist our clients through purchases of equipment and educational resources.

To make a contribution, please contact ASCC at **501-296-1788** / **1-800-459-1517** (voice) / **501-296-1794** (TDD), or send your donation to:

AR Spinal Cord Commission 1501 N. University, Suite 470 Little Rock, AR 72207

From The Director

Many of you remember the day you sustained your injury. For some it meant being transferred from one hospital to another in order to get the emergency care and surgery you needed. In many cases it meant being moved several times with an unstable neck or back. The 'Golden Hour,' when trauma care is most effective, was often lost.

Fast forward to 2009, the Arkansas Legislature passed Act 393, establishing and funding the Arkansas Trauma System. The 50th state to enact this legislation, Arkansas is moving quickly to institute life and disability saving care and treatment. This begins with the Emergency Medical Services, with improved communication towers and a central call center in place to route the patient to the closest, best hospital with trauma staff available. Arkansas and surrounding state hospitals are becoming designated, Level 1 to 4, to determine the acuity of the care they are able to provide and quality improvement procedures are in place to monitor trauma cases and assure best practices are used. Regional Trauma Advisory Boards are being developed to improve communication and collaboration among hospitals treating trauma cases. A statewide injury prevention program is being established, through Arkansas Department of Health's Hometown Health Initiatives as well as other services and events.

Finally, the Trauma Plan includes rehabilitation. ASCC is taking a key role in this aspect of the system. We conducted a survey of all rehabilitation hospitals in the state in the Spring and are working with the Arkansas Department of Health to implement the resulting recommendations. You will hear more about the Rehabilitation plans as we move forward. The recommendations include efforts to assure that there are instate rehabilitation options for individuals on ventilators (now only available for children) and that rehabilitation hospitals who provide services to individuals with spinal cord and other traumatic injuries meet established criteria for excellence.

The Trauma Advisory Council (TAC) that oversees trauma system implementation has made great strides over the past two years and is dedicated in moving Arkansas from last to first in trauma care. ASCC is working closely with the TAC to assure individuals with traumatic injuries get the rehabilitation care they need.

Speaking of quality care, Arkansas lost a great advocate for quality air, quality care and people with spinal cord injuries, when Dr. David Bourne passed away in August. Dr. Bourne was the leading advocate for the Arkansas Clean Air Act and led the Disability and Wellness efforts at the Arkansas Department of Health for most of two decades. He returned to primary care medical practice a few years ago, serving as the Spinal Cord Clinic physician at the Little Rock Veterans Administration Medical Center, where he managed the health care of Arkansas Veterans with spinal cord injuries. David Bourne was a true advocate, he will be missed.

Cheryl L. Vines

AgrAbility Project Comes To Arkansas

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The AgrAbility project itself does not provide direct funding or equipment, but makes referrals to nonprofit organizations that provide services specific to the determined needs. To give a better idea of this service, here is a synopsis of an actual Arkansas AgrAbility client. The first client visited had sustained an injury to his lower back due to a 4-wheeler accident. This injury has left him not only in continual pain, but has also affected his



ability to walk, balance, stand, bend, climb and sit for long periods of time. The steps into the rear entrance of his home were uneven and unsafe, and he had fallen entering or exiting the house several times. These steps have been replaced with new steps, a landing, and a ramp by Dr. Tom Costello and his engineering students at University of Arkansas Fayetteville.



Every time he wanted to enter a field, he had to get off his tractor, open the gate, get back on to drive through, then get off again to close the gate, etc. When mobility is restricted, this simple routine can be painful and tiring. To eliminate this obstacle, his manual gates have been replaced with an automatic gating system. There are several gates to be replaced, so this is a combined effort between Dr. Costello's students and Arkansas Rehabilitation Services.

In addition to assessments and assistive technology assistance, AgrAbility provides prevention education. This education is focused on reducing the risks of developing preventable health conditions or minimizing the obstacles of current health conditions. Education is provided in all Arkansas communities through the various avenues of trainings, public awareness presentations, exhibits, and material distributions.



For information on Arkansas AgrAbility's partners, visit their websites: National AgrAbility Project www.agrability.org U of A Dept of Biological and Agricultural Engineering www.uark.edu ICAN – Increasing Capabilities Access Network www.ar-ican.org Arthritis Foundation Southeast Region, Inc. www.arthritis.org

For more information about Arkansas AgrAbility, contact the county agent of your local Cooperative Extension Service or Jessica Vincent, AgrAbility Coordinator (501) 671-2108 or jvincent@uaex.edu.

Input Needed For Mobility Impaired Hunts

The Arkansas Disabled Sportsmen's Association (ADSA) continues to work on making hunting more accessible to Arkansans with mobility impairments. One of their major projects is to get an Elk Hunt set for mobility impaired hunters.

ADSA President Jimmy Ashley is attempting to work with Arkansas Game and Fish on many of these issues. If you have ideas, needs or have had problems with finding accessible hunting opportunities, please contact Jimmy at: 1701 Airport Rd, Jonesboro, AR 72401, cell 870-919-5590, home 870-935-6875, or e-mail jashley@suddenlink.net.

Fort Smith Support Group

Support groups are a great way to learn more about spinal cord disabilities, local resources, and to meet others who live with spinal cord disabilities. There are a number of groups around the state.

A new Spinal Cord Support group is forming in Ft. Smith and we are looking for new members. Whether you have been a member of a support group in the past or you would just like to find out what it's all about you are welcome all the same.

Please contact Case Manager Stephanie Prewett by phone at 479-478-0504 or by e-mail at stephanie. prewett@arkansas.gov for more information on dates and times.

SPINAL COURIER — 3

The Annual Flu Vaccination, Your Best Protection

By Tom Kiser, M.D., ASCC Medical Director

It is time to get your annual flu vaccination. This is important to protect your health.

Many of you are resistant to having your vaccination for a variety of reasons, but it is an important measure for you to take to avoid the risk of influenza, significant illness and possibly death.

The most likely cause of an allergic reaction to the vaccine is an allergy to eggs, so if you can eat eggs without an adverse reaction, you most likely can take the vaccine. The likelihood of adverse events for such things as Guillain-Barre Syndrome and the flu itself are higher for those who do not get the vaccine than for those who do get it.

Oral medication for influenza must be given within 48 hours of onset of symptoms and is not as effective as the vaccine. Hand washing is important, but again does not match the effectiveness of the vaccination. When making the decision whether to get the vaccination or not, I want you to be informed on the benefits and the risks.

The following are excerpts from the Centers for Disease Control and Prevention (CDC) statement on Prevention and Control of Influenza with Vaccines and Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2010. I have highlighted the statements that concern individuals with a spinal cord injury.

•In the United States, annual epidemics of influenza occur typically during the late fall through early spring. Influenza viruses can cause disease among persons in any age group, but rates of infection are highest among children. During these annual epidemics, rates of serious illness and death are highest among persons over 65 years, children under 2 years, and persons of any age who have medical conditions that place them at increased risk for complications

Have you had your flu shot?

from influenza. Defined as: adults and children who have chronic pulmonary, cardiovascular (except isolated hypertension), renal, hepatic, neurologic/neuromuscular, hematologic, or metabolic disorders.

- •Annual influenza vaccination is the **most effective method** for preventing influenza virus infection and its complications.
- •Vaccination efforts should continue throughout the season, because the duration of the influenza season varies and influenza might not appear in certain communities until spring.



ASCC Medical Director Tom Kiser, M.D.

- •The majority of adults have antibody protection against influenza virus infection within 2 weeks after vaccination.
- •Antiviral medications can be used for chemoprophylaxis and have been demonstrated to prevent influenza illness. When used for treatment, antiviral medications have been demonstrated to reduce the severity and duration of illness, particularly if used within the first 48 hours after illness onset. However, antiviral medications are adjuncts to vaccine in the prevention and control of influenza, and primary prevention through annual vaccination is the most

effective and efficient prevention strategy.

•Reductions in detectable influenza A viruses on hands after hand washing

have been demonstrated, and hand washing has been demonstrated to reduce the overall incidence of respiratory diseases. However, the impact of hygiene interventions such as hand washing on influenza virus transmission is not well understood, and hygiene measures should not be advocated as a replacement or alternative to specific prevention measures such as vaccination.

•Trivalent inactivated influenza vaccine (TIV) is contraindicated and should not be administered to persons known to have anaphylactic **hypersensitivity to eggs**.

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Annual Flu Vaccination

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- •TIV given by IM injection can be used for any person over 6 months, including those with high-risk conditions. Live, attenuated influenza vaccine (LAIV) given by nasal spray may be used for healthy nonpregnant persons aged 2-49 years.
- •The estimated frequency of influenza-related Guillain-Barré Syndrome (GBS) was **four to seven times higher** than the frequency that has been estimated for influenza-vaccine--associated GBS.
- •The Risk for Adverse Events after Vaccination are:
- 1) TIV contains noninfectious killed viruses and **cannot cause**

influenza.

- 2) LAIV contains weakened influenza viruses that cannot replicate outside the upper respiratory tract and are **unlikely to infect others**.
- 3) Many patients will experience no side effects and most known side effects are mild, transient, and manageable, such as injection-site pain after receipt of TIV or rhinorrhea after LAIV.
- 4) Concomitant symptoms or respiratory disease **unrelated to vaccination** with either TIV or LAIV can occur after vaccination.

If you want to read all of the recommendations they can be found at the following web site:

www.cdc.gov/mmwr/preview/mmwrhtml/rr5908a1.htm

Where Do I Get My Flu Shot?

Flu shots are typically administered in October, November, and December.

There are many resources:

- Your Primary Care Physician's Office
- Local Drug Stores
- Home Health Agencies
- Arkansas Department of Health Free Flu Shot Clinics

If you are interested in Free Flu Shot Clinic schedules or availability visit **www.healthy.arkansas.gov** or call your local health unit for the date in your area.

Information Technology Manager Joins ASCC



Jason Francis

Arkansas Spinal Cord Commission hired our first Information Technology Manager in August.

Jason Francis accepted this newly created position and has been busy since he arrived. Jason transfers to our agency from the Arkansas Department of Finance and Administration and brings strong experience working with networks, databases, hardware, software and security. He studied computer science at Henderson State University.

In this new position, Jason becomes the third Editor of the Spinal Courier. Look forward to some great new changes and updates to the Courier as Jason takes the helm.

His responsibilities also include managing the ASCC website, which is undergoing a total 'makeover' too. He will be looking for ideas and input for both as well as some 'testers' for the website. If you have ideas or would be willing to help, please contact Jason at 800-459-1517 or jason.francis@arkansas.gov.

In addition to these roles, Jason also assumes management of all of the elements of our agency's technology, supporting our staff and their hardware and software as well as network security, our e-mail system and the Arkansas Spinal Cord Disability Registry. He will be wearing many different hats!

Jason, his wife Sandy, and son Tyler live in Bryant.

Please join us in welcoming Jason Francis to the Arkansas Spinal Cord Commission.

SPINAL COURIER — 5

New Case Managers At ASCC



Shaylon Ware

We are fortunate at the Arkansas Spinal Cord Commission to have added not one but two very qualified Case Managers to our ranks over the past few months.

Both Shaylon and Stephanie have the experience, drive, and compassion to help us achieve the excellence we strive for at the ASCC.

Shaylon Ware began her duties in July as the new Case Manager in the Little Rock Office replacing Christina Hopson-Allen. Shaylon completed her orientation and training in July and August. She has since been busy meeting her clients in the Lonoke, White and Pulaski County areas. According to Shaylon, "Follow up and follow through are essential in providing services to the clients."

Shaylon received her Master's degree in Rehabilitation Counseling from Northern Illinois University. She has a strong background in Rehabilitation Case Management most recently working as a Rehabilitation Counselor with the Illinois Division of Rehabilitation Services. "We are excited to have Shaylon join us and feel her experience will be an asset to our agency and to those individuals she serves," commented Client Services Administrator Patti Rogers.

Moving to a different state, finding a new home and starting a new job has kept Shaylon on the go over the past few months. Shaylon and her 11 yr. old son Jalen have also been spending time getting reacquainted with lots of family members living in the Lonoke



Stephanie Prewett

County area. This summer has been quite an experience for Shaylon. "Someone should have told me before I moved about the Arkansas heat wave", she emphatically stated.

Shaylon has a passion for singing and is currently a member of her church choir. Her favorite activities also include fishing, swimming and scrap booking.

This summer has also brought a new Case Manager to the Ft. Smith office. Stephanie Prewett began her duties in August replacing Darrin Clark. Stephanie will be providing services in Crawford, Sebastian, Logan, Franklin, Scott, and part of Washington counties.

Stephanie, a graduate from Henderson State University with a degree in Psychology and Sociology, has excellent Case Management experience in crisis intervention, advocacy and facilitating support groups.

"We are fortunate to find someone with Stephanie's experience and knowledge of community resources", stated Client Services Administrator Patti Rogers.

Stephanie is a single mom with three children, Zachary age 16, Addyson age 6, and Jordyn age 5. When she can find any spare time Stephanie enjoys reading, camping and float trips. She and her children live in the Alma area.

Please join the Commission Members and staff in welcoming both Shaylon and Stephanie aboard!

Arkansas Spinal Cord Foundation Fundraiser

The Arkansas Spinal Cord Foundation provides a fundraising arm for the Commission. Through the Foundation we are able to solicit private grants and donations.

The Foundation's first fundraising event, the Youth Fall Fun Trap Shoot took place on October 1, 2011 at the Blue Rock Sportsman's Club in North Little Rock.

Young trap shooters from high schools around the state attended the event. Winners of the grand prize shot guns were Keaton Webb from Caddo Hills in the Junior Division and David Graves from Searcy in the Senior Division. Funds raised from this event will go to scholarships for students with spinal cord disabilities.



Junior Division Winner Keaton Webb



ASCC Staff Helping At The Consession Stand



Senior Division Winner David Graves



Let The Competition Begin!

Mark Your Calendar!

The holidays will be here before you know it!

The 2011 Spina Bifida Christmas Party sponsored by the Spina Bifida Support Group of Arkansas is scheduled for Sunday, December 11, 2011, 2:00 – 4:00 p.m. at Camp Aldersgate, 2000 Aldersgate Rd., Little Rock, AR.

Individuals who live with Spina Bifida and their families are welcome to join us in fun and celebration.

Activities will include music, games, fellowship, Chef Garry's great cooking, and a visit from *You Know Who*!

Additional information will be sent out in November. If you have any questions or comments feel free to contact Vicki Rucker at 501-978-7222.

Online Resource For A Healthier You!

Are you in need of motivation, support, new ideas and expert advice in regards to physical activity and healthy eating? Looking for a program that is tailored to your individual needs and interests? The National Center on Physical Activity and Disability (NCPAD) has a new program: 14-Week Program to a Healthier You! that may be the perfect solution to meet these needs and keep you moving forward towards your goals.

This FREE, personalized, web-based program is designed to help people with mobility limitations, chronic health conditions, and physical disabilities meet their physical activity and nutrition goals over the course of 14 weeks. The program can help individuals who are just getting started, those who have been working at a healthy lifestyle for years, and everyone in between by providing them with:

- New, personalized weekly exercises
- Physical activity and nutrition tips
- Motivational resources
- Weekly recipes
- Features to help you track your activity and what you eat
- Optional reminders and alerts
- Opportunities to connect with other participants
- Access to 14-Week expert coaches

For more information and to register for the program, visit **www.ncpad. org/14weeks**. NCPAD is a federally funded program of the Centers for Disease Control and Prevention Disability and Wellness program.

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The Squeaky Wheel

The squeaky wheel . . . gets the grease! This column is about grease—things that make life for persons with spinal cord disability go smoother and ease your way in the world. "Things" can be hints, equipment adaptations, innovations, tricks-of-the-trade, procedural shortcuts, life experiences, or things you "should have done but didn't."

No Button Magnetic Bluetooth Earpiece

Al Lemke of Victory Walk Inc. in Springdale passed along this tidbit of information.

The NoButtonsHeadset is a Bluetooth headset that is activated without the need to press a button which makes it excellent for anyone who is quadriplegic or has other upper extremity disabilities that prevent them from touching their ears.

The headset is triggered by passing the headset near and then away from a magnet to mimic the clicking of a button, by placing the magnet on a pillow, headrest, or wand.

The headset has built-in voice commands and can also interface with your phone's built-in voice commands.

Included with the headset is a wall charger, a USB charger, a magnet on a 29" flexible rod, a magnet embedded in Velcro, and a loose magnet.

If you would like more information on these headsets please visit their website at:

www.nobuttonsheadset.com

We invite you to send in your helpful hint—your bit of "grease." Contact your ASCC Case Manager, write us at Spinal Courier, Arkansas Spinal Cord Commission, 1501 N. University, Suite 400, Little Rock, AR 72207 or e-mail us at jason.francis@arkansas.gov and put "Squeaky Wheel" in the subject line.

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